TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

PATENT APPL

First Named Inventor or Application Identifi

4521

Christopher M. Bowles

PTO/SB/05 (2/98)

METHOD FOR UNPATTERNED RESIST ETCH BACK OF SHALLOW TRENCH ISOLATION REFILL INSULATOR

Express Mail Label No.

Jacqueline J. Garner

Attorney Docket No

EL645450377US

On Page 1 of the specification, before line 1, insert -This application claims priority under 35 USC § 119(e)(1) of provisional application number 60/171,694 filed 12/22/99.

Title

TION

APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents					ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231					
Y Fee Tr	ransmittal Form (e.g., PTO/SB/17 an original, and a duplicate for fee pro)	·	6.		Microfiche	Computer Program (/		825	
	red arrangement set forth below)	[Total Pages	18	<i>1</i> 7.		eotide and/or plicable, all r	Amino Acid Sequenc necessary)	e Submission	, jc	
	iptive title of the Invention References to Related Application	ons			a.		Computer Readable	Сору		
- Stater	nent Regarding Fed sponsored Rence to Microfiche Appendix				b.		Paper Copy (identica	al to computer cop	у)	
_	round of the Invention Summary of the Invention				C.		Statement verifying i	dentical of above	copies	
	Description of the Drawings (if file ed Description	d)			ACCOMPANYING APPLICATION PARTS					
- Claim	(s) act of the Disclosure			8.	X	Assignme	nt Papers (cover shee	t & Documents(s)))	
3. X Drawing	g(s) (35 USC d113)	[Total Sheets	2	<i>]</i> 9.			3.73(b) Statement re is an assignee)	Power Attorne		
4. Oath or Declarat	tion	[Total Pages	3	<i>]</i> 10.		English Tr	anslation Document (i	f applicable)		
a. X	Newly Executed (original or copy)		11.	X		n Disclosure (IDS)/PTO-1449	X Copies Citation		
	Copy from a prior application (37 (for continuation/divisional with B		d)	12.	X	Preliminar	y Amendment		•	
	[Note Box 5 below]			13	X Return Receipt Postcard (MPEP 503)					
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR \$1.63(d)(2) and 1.33(b).					13. (Should be specifically itemized) 14. Statement(s) Statement filed in prior application Status still proper and desired (PTO/SB/09-12)					
•				15.		Certified C	opy of Priority Docum riority is claimed)	ent(s)		
5. Incorpor The entithe oath	16.	16. Other:								
being pa hereby i		A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon.								
17. If a CONTINUI	NG APPLICATION, check a	ppropriate bo	x and supp						dment:	
Continuation	_		ntinuation	ı-in-par	t (CIP)		of prior application	n No: /		
Prior applica	Prior application Information: Examiner Group / Art Unit: 18. CORRESPONDENCE ADDRESS									
		18. CORF	ESPUNDE	NCEA	DUKES	55				
<u></u>	Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below									
NAME	Jacqueline J. Garn		Instrum	ents I	ncorp	orated				
ADDRESS	PO Box 655474, M/			_			7/0.00=	<u>-</u> -		
COUNTRY	Dallas	STATE	TX	74 4 2			ZIP CODE	75265		
COUNTRY	USA TE	LEPHONE	(972) 2	<u>/1-11</u>	76		FAX	(972) 917-	4418	

Registration No. (Attorney/Agent)

Date

36,144

bours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amoun asthington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistance of the complete of

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Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997

Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

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	Complete If Known						
—	Application Number	TBD					
ber 1.	Filing Date	12/07/00					
ty statement, O/SB/09-12.	First Named Inventor	Christopher M. Bowles					
	Examiner Name	TBD					
0/00/03-12.	Group / Art Unit	TBD					
729.00	Attorney Docket No.	TI-24521					

TOTAL AMOUNT OF PAYMENT (\$)728.00					Attorney Docket No. TI-24521					
METHOD OF PAYMENT					FEE CALCULATION (continued)					
The Commissioner is hereby authorized to charge to the following Deposit Account,					ADDIT	IONAL	FEES		-	
Deposit Account Number 20-0668			Large Fee Code 105	Entity Fee (\$) 130	Small Fee Code 205	Entity Fee (S) 65	Fee Surcharge - lat	Description	Fee Paid	
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Charge any add required or cred overpayment			dicated fees and al fee required or rerpayment	139	130	139	130	Non-English sp	ecification	
				147	2,520	147	2,520		uest for reexamination	
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**or number previously pa	_	Reissue, see below		149	790	249	395	examined (37	onal invention to be CFR 1.129(b))	
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SUBMITTED BY									Complete (if applic	able)
Typed or Printed Name Jacque ine J. Garner								-	Reg. Number	36,144
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